

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF MICHIGAN

In re: Bervis Hays Griffin

Case No. 11-43157
Chapter 13

APPLICATION FOR PAYMENT FROM UNCLAIMED FUNDS

The undersigned, Bervis Hays Griffin, applies to the Bankruptcy Court for the Eastern District of Michigan for entry of an order directing the Clerk of Court to remit to the applicant the sum of \$ 2,091.30, said funds having been deposited into the Treasury of the United States pursuant to an order of the court as unclaimed fund for Bervis Hays Griffin.

The applicant further states that:

1. (Indicate one of the following)

- ☒ Applicant is the party requesting payment of the unclaimed fund named above and states that no other application for this unclaimed fund has been submitted by or at the request of the claimant.
- ☐ Applicant is the duly authorized representative for the business or corporation named above as the claimant. Applicant has reviewed all records of the claimant and states that no other application for this claim has been submitted by or at the request of this claimant. An Affidavit of Claimant is attached and made part of this application.
- ☐ Applicant is either a family member of the deceased claimant or a successor in interest to the individual or business named as the claimant. An original "power of attorney" conforming to the official Bankruptcy Form and/or other supporting documents which indicated the applicant's entitlement to this claim is attached and made part of this application.

FILED '21 APR 15 AM 11:28
US BANKRUPTCY ME-FLNT

UNITED STATE BANKRUPTCY COURT
EASTERN DISTRICT OF MICHIGAN

In re: Bervis Hays Griffin

Case No. 11-43157

Chapter 13

AFFIDAVIT OF CLAIMANT

I, Bervis Hays Griffin, do hereby state
that I am the claimant to the unclaimed funds released in this application and that I am,
to the best of my knowledge, the legal owner of these funds.

Mailing address:

10351 Oak Park Blvd

Oak Park MI 48237

Phone number:

(313) 926-0866

Social security number XXX-XX-3456

If claimant is a corporation, the federal tax ID number N/A

1. Claimant History: Substantiate claimant's right to the claim; i.e. if the payment is to an individual, include a copy of driver's license or state identification card. If a corporation, include purchase agreements regarding the right to ownership. Attached are certified copies of all necessary documentation.

2. I (or the company which I represent) neither have previously received remittance for this claim nor contracted with any other party other than the person

Page 2 of 2

Affidavit of Claimant

I declare under penalty of perjury that the foregoing copy is true and correct.

Dated:

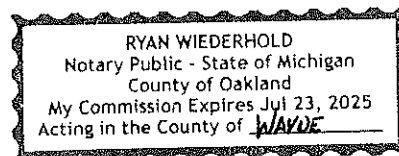
01/01/21

Brian D. Gylli

Signature of Claimant

Sworn to and Subscribed before me this
01st day of APRIL 20 21

RW
NOTARY PUBLIC AT LARGE
STATE OF MICHIGAN



UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF MICHIGAN

In re: Bervis Hays Griffin

Case No. 11-43157

Chapter 13

PROOF OF SERVICE

I, the undersigned, hereby certify that on the 07 day of April,
2021, a copy of the Application for Payment From Unclaimed Funds by _____

Bervis Hays Griffin was served on the

United States Attorney for the Eastern District of Michigan at the following address:

U.S. Attorney Office, Federal Building
Attn: Civil Division - Financial Litigation
600 Church Street
Flint, MI 48502

Dated: 04/01/21

By: Bervis Hays Griffin